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APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTOR	NEY DOCKET NO.
			EXAMINER	
			ART UNIT	PAPER NUMBER
				33
			DATE MAILED:	
	INTER	VIEW SUMMARY		
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xhibit shown or demonstration con	ducted: Yes Yo If yes	, brief description:		
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iless the paragraph above has bee NOT WAIVED AND MUST INCLU tion has are ready been filed, APP IBSTANCE OF THE INTERVIEW.	en checked to indicate to the co	ontrary. A FORMAL WRITTEN	RESPONSE TO THE I	ance to the lest Office
Since the Examiner's interview rejections and requirements the is considered to fulfill the responsible interview unless box 1 about 1	at may be present in the last O onse requirements of the last O	TICE action, and since the clair	ns are now allowable t	hic completed form
aminer Note: You must sign this fo	rm unless it is an attachment to	another form.	Havid	Luzo
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